## 05-29-53



AMENDMENT

CLIENT-MATTER NO .: 66663-020 (P-EA 4854)

SERIAL NO: 09/922,221 FILING DATE: August 2, 2001

**EXAMINER:** A. Chakrabarti GROUP ART UNIT: 1634 CONFIRMATION NO.: 8915

INVENTION:

METHOD FOR ASSEMBLY OF A POLYNUCLEOTIDE ENCODING A TARGET

POLYPEPTIDE

TO: COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" MAILING LABEL NUMBER: EV 347 544 860 US

DATE OF DEPOSIT: May 27, 2003

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VIRGINIA 22313-1450.

Mary Begalla

Person Mailing Paper or Fee

Transmitted herewith is a Response to the Office Action mailed November 27, 2002, with Exhibit A, in the above-identified application.

- X Small Entity status of this application has been established under 37 CFR 1.27.
- X Petition for Extension of Time is enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- X No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER	NUMBER EXTRA PREVIOUSLY CLAIMS					RATE		FEE		
	AMEND- MENT				SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY		
TOTAL CLAIMS	23	-	23	_	0	×	\$9	\$18	=	\$0.00	\$
INDEPEN- DENT CLAIMS	5	-	5	-	0	x	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			YES	_	X · NO		\$140	\$280	=	\$0.00	\$
						TOTAL ADDITION	NAL FEE		\$0.00	\$	

- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventor: Glen A. Evans Serial No.: 09/922,221 Filed: August 2, 2001

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Y Please charge my Deposit Account No. 502624 the amount of \$465.00 which covers the fee for a three-month extension of time. A duplicate copy of this sheet is enclosed.

- The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.
- X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Astrid R. Spain Registration No. 47,956

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